

June 18, 2020

AHS Medicaid Policy Unit 280 State Drive, Center Building Waterbury, VT 05671-1000

Submitted via e-mail to AHS.MedicaidPolicy@vermont.gov

Thank you for this opportunity to comment on the planned expansion of provider-to-provider store and forward reimbursement for Vermont Medicaid.

Bi-State Primary Care Association (Bi-State) is a nonpartisan, nonprofit 501(c)(3) charitable organization that promotes access to effective and affordable primary care and preventive services for all, with special emphasis on underserved populations in Vermont and New Hampshire. Bi-State's Vermont membership includes 11 Federally Qualified Health Centers (FQHCs) delivering primary care at 64 sites and serving over 177,000 Vermonters. Our members also include Area Health Education Centers, Planned Parenthood of Northern New England, and Vermont's free clinics. Our members serve 37-percent of Vermont Medicaid enrollees.

We strongly support this proposal to expand reimbursement for provider-to-provider store and forward consultations, or eConsults. As Bi-State has previously testified, we believe that these systems will reduce unnecessary specialist referrals, keeping care in the primary care home when medically appropriate and sparing patients cost and inconvenience. These consultation options will help our rural primary care workforce feel supported by making specialist input more readily available. They will also improve access to care for patients who *do* require a specialist visit through reducing wait times and lowering no-show rates.

A June, 2020, study by the Milbank Memorial Fund used four systematic reviews and 36 individual studies to conclude that eConsults resulted in: improved access to specialty care; more efficient use of health care resources; high patient and clinician satisfaction; lower total cost of care¹.

¹ Thielke A, King V. Electronic Consultations: A Triple Win for Patients, Clinicians, and Payers. Milbank Memorial Fund. June 2020.

Connecticut Medicaid's use of 99451 and 99452 codes was the basis of one early study, which found per-patient savings of approximately \$500 over a six month period². Federally Qualified Health Centers were leaders in advocating for this option in Connecticut, and we anticipate it will be an important tool now to FQHCs in Vermont. The Milbank study cited above reviewed many different models for eConsults and found cost of care savings ranging from 36- to 83-percent over traditional specialist referral systems.

Although we often highlight eConsults as a cost savings and efficiency measure, the greatest impact will be on improving access to high quality care. This benefit was true prior to the COVID-19 public health emergency, but the disruption to the health care system, which will be felt well into the future, emphasizes this point. eConsults significantly reduce unnecessary in-person appointments and can support a primary care workforce that is already stretched thin. The California Health Care Foundation was an early innovator in eConsults as a tool to improve access to care; they have closely tracked the impact of eConsults during COVID-19. Early research findings show increased utilization of these systems when there are interruptions to in-person care, and work is happening now nationwide to optimize use of eConsults moving forward as a part of COVID-19 recovery strategies³.

Bi-State Primary Care Association looks forward to working with our members, and Vermont payers, to effectively implement interprofessional consultations as a way to achieve better quality care, more efficiently for patients and at a lower total cost of care for the system.

Sincerely,

Helen Labun Director of Vermont Public Policy Bi-State Primary Care Association

² Andersen, Daren MD et al. A Cost-Effectiveness Analysis of Cardiology eConsults for Medicaid Patients. American Journal of Managed Care. January 2018.

³ Phadke, N.A., del Carmen, M.G., Goldstein, S.A. et al. Trends in Ambulatory Electronic Consultations During the COVID-19 Pandemic. J GEN INTERN MED (2020); Personal communication from D. Andersen, ConferMED; National eConsult workgroup at https://econsulttoolkit.com/.